For any queries, contact LIC's Share Registry team at: Phone: 0800 542 742 Email: shareregistry@lic.co.nz



ORDINARY SHARE TRANSFER

Ordinary Share Transfer Details

FORM 3

For the consideration stated below, the Transferor (named below) transfers to the Transferee (named below) and the Transferee accepts the transfer of, the Livestock Improvement Corporation Limited ("LIC") Ordinary Shares ("Shares") subject to the current and future obligations in respect of the Shares contained in the Constitution of LIC and the LIC Group Conditions and Service Rules. See section 4 for instructions for completing this form.

The Transferor and Transferee acknowledge that any transfer of Shares is subject to the prior written approval of the LIC Board. Each Transferor and each Transferee must sign the form below.

Company	Livestock Improvement Corporation	Ltd	
Number and full description of shares.			
Transfer from (Seller)			
Transferor Full Name(s)			
(If the Shares are held			
jointly by more than one holder, please list full			
names of each holder)			
Full postal address			
Transferor Participant Coo	de:	Transferor CSN:	
Consideration	As agreed between the Transferor ar	nd the Transferee	
Transfer to (Buyer)			
Transferee Full Name(s)			
(If the Shares are to be			
held jointly by more than one holder, please list			
full names of each			
holder)			
Full postal address			
Transferee Participant Code: Transferee CSN:		Transferee CSN:	
Th	is share transfer is dated the	day of	2025
2. Transferor Signa	ature		
Signed by the Transferor(s	5)	in the presence of:	
		V	
		X	
X		Name:	
Name:			
^		Name: Occupation:	
Name:		Name: Occupation: Address:	
Name: Date:		Name: Occupation:	
Name: Date:		Name: Occupation: Address:	
Name: Date: X Name:		Name: Occupation: Address:	
Name: Date: X Name: Date:		Name: Occupation: Address:	
Name: Date: X Name: Date: X X		Name: Occupation: Address:	
Name: Date: X Name: Date: X Name:		Name: Occupation: Address:	

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3. Transferee Signature			
<u> </u>	in the presence of		
Signed by the Transferee(s)	in the presence of:		
	X		
<u>X</u>	Name:		
Name:	Occupation:		
Date:			
X	Address:		
Name:	Date:		
Date:			
X			
Name:			
Date:			
4. Instructions for Completing this form			
1. All of the Transferor's (seller's) Shares described in this form will be transferred by this form. If all Shares held by the Transferor (seller) are being transferred, please write "All Shares held by the Transferor (in respect of the Participant Code listed below)". If not, , please fully describe the number and type of Shares being transferred.			
2. Enter the full name and usual residential address of eac	Enter the full name and usual residential address of each Transferor (seller).		
3. Enter the Transferor's (seller's) LIC Participant Code and trade the Shares and should contact LIC immediately.	Enter the Transferor's (seller's) LIC Participant Code and NZX CSN. If the Transferor (seller) does not have a CSN you may not		
4. Enter the full name and usual residential address of eac	Enter the full name and usual residential address of each Transferee (buyer).		
Note that under section 92 of the Companies Act 1993, securities may not be registered in the name of a Trust (unless it is a Registered Charitable Trust, and documented evidence is produced to LIC for noting). In the case of other trusts, shares must be registered in the names of the trustees. The word 'Trust' must not be used in any part of the registered name or address, unless it forms part of the entity's registered name.			
5. Enter the Transferee's (buyer's) LIC Participant Code ar not trade the Shares and should contact LIC immediatel	Enter the Transferee's (buyer's) LIC Participant Code and NZX CSN . If the Transferee (buyer) does not have a CSN you ma		
	The transfer form must be signed by each Transferor (seller) and Transferee (buyer), dated and witnessed. All joint holders must sign. The signature of a related person as a witness to the signature of the executing party is not acceptable. A witness		
. If the form is being signed under Power of Attorney, section 5 of this form should also be completed.			
5. Certificate of Non-Revocation of Power of Attorney			
I,			
of,			
HEREBY CERTIFY			
1. THAT I am the Attorney of	THAT I am the Attorney of		
2. THAT I have signed this Ordinary Share Transfer form as conferred upon me.	THAT I have signed this Ordinary Share Transfer form as Attorney under the Power of Attorney and pursuant to the power conferred upon me.		
3. THAT I have not received any notice or information of t believe the same to be in full force and effect.	THAT I have not received any notice or information of the revocation of the Power of Attorney by death or otherwise and believe the same to be in full force and effect.		
SIGNED at			

SIGNATURE

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